

1		ARIZONA CRASH REPORT		ADOT USE ONLY																Agency Report Number 10-000021602									
				REPORT ID																									
2		POLICE ONLY - FORWARD COPY TO ADOT TRAFFIC RECORDS SECTION 064R 206 S. 17th AVE., PHOENIX, ARIZONA 85007-3233		YEAR				MONTH				DAY				HOUR				NCIC NO.				OFFICERS ID NO.				Total No. of Sheets 4	
				1	0	1	2	1	4	1	7	3	0	0	7	1	1	0	3	1	7	9							
3 COMPLETE THE TRUCK/BUS SUPPLEMENT IF ANY (circle) AND ANY (diamond) ARE CHECKED																													
3		Total Units 2		Total Injuries 1		Total Fatalities 0		Estimated Total Damage Compared to Limit: Over Under		Fatal Hit/Run Unit #		Persons Transported for Immediate Medical Care?		Tow Away of At Least One Vehicle from Scene?		District or Grid No.		LOCATION											
																		On Highway/Road / Street N COOPER RD										City GILBERT	
4		On Highway/Road / Street N COOPER RD		Intersecting Street, Road / M.P. or R.P. At From W ELLIOT RD		Air Bag Status (ABS)		Injury Severity (IS)		Injured (Trans)ported By		Seating Position																	
												18-Front/Sealy/Other(Child/JnyLap) 28-Jny38-Additional passengers/jny vehicle/byrow 51-Injenclosedjncargo/jarea 52-Injenclosedjncargo/cargo/jarea 55-RidingjnyVehicle/jexterior 99-Unknown																	
5		Ejection (Eject)		Extraction (Extr)		Direction of Travel (DoT) Before 1st Crash Event		Lane		Roadway Grade		Roadway Alignment		Seating Position		Injury Severity (IS)													
																1 - No Injury 4 - Incapacitating Injury 0 - Not Transported 97 - Other 2 - Possible Injury 5 - Fatal Injury 1 - EMS 99 - Unknown 3 - Non Incapacitating Injury 99 - Not Reported / Unknown 2 - Law Enforcement													
6		Property Damaged (Other than Vehicles) Block 22B, Event 21 - 41		Owner Code 1 - Private 3 - Federal Government 5 - County in Arizona 7 - Tribal Nation 99 - Unknown		Inventory Tag No.		Owner's Name		Address (or Bar Code ID Number)		City		State		Zip Code		Telephone Number		PASSENGERS									
																				GILBERT POLICE RECORDS To: MuckRock News Date: 3/11/19 Employee: DF5801									
7		Photos Taken		Photographer's Name, ID Number, and Agency		Invest. at Scene		Date Invest.		Time Invest.		Officer's Signature (3179) RIPLEY, PAUL																	
												Supervisor's Signature (1091) SANGER, JESSE																	
8		Invest. at Scene		Date Invest.		Time Invest.		Agency GILBERT POLICE																					
								Date Completed 12/14/2010																					

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ARIZONA CRASH REPORT		REPORT ID												Agency Report Number								
CONTINUED		YEAR			MONTH			DAY			HOUR			NCIC NO.			OFFICERS ID NO.			10-000021602		
POLICE ONLY - FORWARD COPY TO ADOT TRAFFIC RECORDS SECTION 064R 206 S. 17th AVE., PHOENIX, ARIZONA 85007-3233		1	0	1	2	1	4	1	7	3	0	0	7	1	1	0	3	1	7	9	Total No. of Sheets 4	
25	UNIT 1 VehiclejDamagedjArea (circlejupjtojthree)	2	3	4	5	6	7	8	0j-NONE 10j-UNDERCARRIAGE 11j-TOTALED 97j-OTHER 99j-UNKNOWN	UNIT 2 VehiclejDamagedjArea (circlejupjtojthree)	2	3	4	5	6	7	8	0j-NONE 10j-UNDERCARRIAGE 11j-TOTALED 97j-OTHER 99j-UNKNOWN				
26	GLOBAL POSITION:	LATITUDE						LONGITUDE														
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
		Degrees Minutes Seconds						Degrees Minutes Seconds														
27	CRASH DIAGRAM																				<input type="checkbox"/> MEASUREMENTS ARE APPROXIMATE AND NOT TO SCALE <input type="checkbox"/> MEASUREMENTS ARE SCALED (SCALE = _____)	
29	NARRATIVE										Describejwhatjyhappened											
<p>Unit two was northbound in the number one lane on S Cooper Rd approaching W Elliot Rd (Gilbert). Unit one was exiting the gas station on the southwest corner of S Cooper Rd/W Elliot Rd attempting to turn south on S Cooper Rd (Gilbert). As unit one exited the gas station parking lot a witness in the number two lane of southbound S Cooper Rd had to hit the brakes to keep from colliding into unit one. Unit two did not see unit one until it was too late and collided into the driver side of unit one.</p> <p>No injuries were initially reported on scene. Gilbert Fire responded to evaluate both drivers due to the manner of the crash. After Gilbert Fire left Restituto Lansang (Driver of unit two began to walk with a limp and complained of leg and arm pain. Restituto said he did not need paramedics to respond again and would get a ride to a medical facility.</p> <p>Unit one suffered severe visible damage to the driver side of the vehicle. Unit two suffered severe visible damage to the front end of the vehicle. Unit one was driven from the scene. Unit two was towed by All City Towing.</p> <p>Matthew Robert Oman (Driver of unit one) was issued civil citation 270896 into the Gilbert Municipal Court for a violation of ARS 28-774 Fail to yield from private</p>																						

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NARRATIVE (Continued)				YEAR			MONTH			DAY			HOUR				NCIC NO.				OFFICERS ID NO.				10-000021602			
<i>POLICE ONLY</i> - FORWARD COPY TO ADOT TRAFFIC RECORDS SECTION 064R 206 S. 17th AVE., PHOENIX, ARIZONA 85007-3233				1	0	1	2	1	4	1	7	3	0	0	7	1	1	0	3	1	7	9						
CRASH DESCRIPTION (Narrative)																												
drive.																												
ASSISTING OFFICERS: (3179) RIPLEY, PAUL (1576) CLUFF, MICHAEL																												
INVESTIGATOR'S SIGNATURE												DATE																
(3179) RIPLEY, PAUL												12/14/2010																



Gilbert Police Department

Vehicle Impound/Tow ☒ Original ☐ Supplement

Report Number: 19-21602
☒ Accident ☐ Incident

Report Title NON INJURY COLLISION		Location of Occurrence COOPER ST & ELIZABETH	
Date of Report 12-14-10	Time of Report 1730	Tow Type → 28-872 Tow/Impound <input checked="" type="checkbox"/> Accident 28-3511 - 30 day hold	<input type="checkbox"/> Traffic Hazard <input type="checkbox"/> Abandoned <input type="checkbox"/> Evidence / Seizure <input type="checkbox"/> Other <input type="checkbox"/> Stolen Recovery

Driver Information	
First Name RESTITUTO	Middle Name G WINTO
Last Name LANSANG	Suffix
DL Number	DL ST AZ
Home Address	City
State	Zip Code

Vehicle Information	
Year 09	Color RED
Make HONDA	Model CRU
Style 4DSW	State AZ

Registered Owner 28-3511 Hold Notification: Date _____ Time _____ Method: <input type="checkbox"/> MAILED <input type="checkbox"/> IN - PERSON	
<input checked="" type="checkbox"/> Registered Owner Same as Driver	
First Name	Middle Name
Last Name	Suffix
Home Phone	
Home Address	City
State	Zip Code
Cell Phone	

Registered Owner 28-3511 Hold Notification: Date _____ Time _____ Method: <input type="checkbox"/> MAILED <input type="checkbox"/> IN - PERSON	
First Name	Middle Name
Last Name	Suffix
Home Phone	
Home Address	City
State	Zip Code
Cell Phone	

Lien Holder 28-3511 Hold Notification: Date _____ Time _____ Method: <input type="checkbox"/> MAILED <input type="checkbox"/> IN - PERSON	
Business Name AHFC	
Phone	
Mailing Address 6261 KATELLA AVE STE 1A	City CYPRESS
State CA	Zip Code 90630
Fax	
Tow Company: ALL CITY TOW	Address 1600 N DELAWARE
City CHANDLER	State AZ
Phone Number 4833-3700	
Tow Company Storage Yard Address SAA ↑	Tow Truck Driver Name (Print) TIM
Tow Authorized By REPLEY	

CAUSE FOR 28-3511 - 30 DAY HOLD/IMPOUNDMENT (CHECK ALL THAT APPLY):	
<input type="checkbox"/> The driver has never been issued a driver's license or permit or does not produce evidence of a driver's license from another jurisdiction <input type="checkbox"/> The driver's driving privilege is suspended or revoked. <input type="checkbox"/> Ignition interlock required and not functioning. <input type="checkbox"/> The driver is being arrested for either extreme DUI or Aggravated DUI and currently licensed spouse is not present. (Vehicle must be registered and insured to be eligible to be release to spouse) <input type="checkbox"/> The driver was arrested for under 21 operating vehicle with alcohol in body <input type="checkbox"/> The person is involved in an accident (all 3 required): 1. That results in property damage or injury to or death of another person <u>And</u> 2. Person's driving privilege is canceled, suspended, or revoked or has never been issued a license or permit <u>And</u> 3. The person does not have insurance	

Vehicle Inventory	
Personal Property Y N	Keys in Vehicle Y N
Driveable Y N	Radio/Stereo Y N
Apparent Damage Y N UNK	Camper Y N
Tires/Wheels Y N	Collision Involved Y N
List Personal Property:	

Remarks:

28-872 Tow - Owner Notification:	Date:	Time:	Method: <input type="checkbox"/> Phone <input type="checkbox"/> In-Person	Entered ACIC as STORED
Officer Name REPLEY	Signature		Ser. Number 3179	
Gilbert Police Department • 75 East Civic Center Drive • Gilbert, Arizona 85296 (480) 503-6500				

28-872/28-3511 Tow White (Original) - Report Blue (Copy) - Mailing Pink (Copy) - Driver/Owner of Vehicle Yellow (Copy) - Tow Driver Receipt
 Evidence Impound White (Original) - Property Custodian Blue (Copy) - Agency Use Pink (Copy) - Report Yellow (Copy) - Tow Driver Receipt

[illegible]

Vehicle Contents Released To:							
First Name	Middle Name	Last Name			Suffix	DL Number	DL ST
Home Address		City	State	Zip Code	Home Phone		
Tow Company:		Address		City	State	Phone Number	
Tow Company Storage Yard Address			Tow Truck Driver Name (Print)			Tow Authorized By	

Notes/Comments:

[illegible]